

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Oregon Republican Party

ADDRESS (number and street)

Post Office Box 789

☐Check if different
than previously
reported. (ACC)

Salem

OR

97308

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00153031

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

10

19

2006

through

11

27

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Charles S. Oakes

Signature of Treasurer

Electronically Filed by Charles S. Oakes

Date

04

02

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	9	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	7	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		8109.60
(b) Cash on Hand at Beginning of Reporting Period	37429.23	
(c) Total Receipts (from Line 19)	26371.46	239314.18
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	63800.69	247423.78
7. Total Disbursements (from Line 31)	37413.15	220936.24
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	26387.54	26487.54
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	91275.86	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	9	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	7	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5700.00	75373.02
(i) Itemized (use Schedule A)	6573.55	88096.83
(ii) Unitemized	12273.55	163469.85
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	2000.00
(b) Political Party Committees	0.00	10300.00
(c) Other Political Committees (such as PACs)	0.00	175769.85
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	12273.55	175769.85
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	14097.91	63544.33
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	14097.91	63544.33
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	26371.46	239314.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12273.55	175769.85

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	2204.13	17316.38
(ii) Non-Federal Share.....	3918.45	30784.70
(b) Other Federal Operating Expenditures.....	20608.66	75137.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	26731.24	123238.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	10681.91	97697.57
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	10681.91	97697.57
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	37413.15	220936.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	33494.70	190151.54

DETAILED SUMMARY PAGE

of Disbursements

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Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	12273.55	175769.85
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12273.55	175769.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	22812.79	92453.97
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	22812.79	92453.97

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Robert DeArmond

Mailing Address PO Box 3517

City State Zip Code
 Central Point OR 97502-0019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 0 / 2 0 0 6

Transaction ID: 61110.C89030

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Mr. & Mrs. Edvard Evenson

Mailing Address P.O. Box 127

City State Zip Code
 Clatskanie OR 97016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 0 / 2 0 0 6

Transaction ID: 61110.C89027

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)

Mr. & Mrs. Edvard Evenson

Mailing Address P.O. Box 127

City State Zip Code
 Clatskanie OR 97016

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 7 / 2 0 0 6

Transaction ID: 120120060C89254

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Stuart Ferguson

Mailing Address 2588 Ridgemont Drive

City State Zip Code
Eugene OR 97405

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	6

Transaction ID: 61120.C89163

Amount of Each Receipt this Period

2000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Charles Johnston

Mailing Address 68619 Shaw Road

City State Zip Code
Pilot Rock OR 97868

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employedOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	0	6

Transaction ID: 120620060C89311

Amount of Each Receipt this Period

200.00

Receipt

C. Full Name (Last, First, Middle Initial)
I. Jerome Kenagy

Mailing Address 955 Ranch Rd

City State Zip Code
Reedsport OR 97467-1931

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	3		2	0	0	6

Transaction ID: 120620060C89307

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Anthony Pappas
 Mailing Address 685 Hazeltine Ave SE

City State Zip Code
 Salem OR 97306-9357

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Willamette Valley Radiology

Occupation
 Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 3 / 2 0 0 6

Transaction ID: 120620060C89304

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)
 Bond Starker
 Mailing Address P.O. Box 809

City State Zip Code
 Corvallis OR 97339-0809

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Starker Forests

Occupation
 Forester

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61120.C89168

Amount of Each Receipt this Period

1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
 Donald Tykeson
 Mailing Address PO Box 70006

City State Zip Code
 Eugene OR 97401

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Tykeson Associates Enterprises

Occupation
 Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 3 / 2 0 0 6

Transaction ID: 61127.C89227

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)

Carlton Woodard

Mailing Address 61 Hilltop Dr

City State Zip Code
 Cottage Grove OR 97424

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 3 / 2 0 0 6

Transaction ID: 120620060C89310

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

5700.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Direct Mail Systems, Inc

Mailing Address 12450 Automobile Boulevard

City
Clearwater

State
FL

Zip Code
34622-

Purpose of Disbursement
PARTY BUILDING DIRECT MAIL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61207.E12323

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6941.68

PARTY BUILDING DIRECT MAIL

Full Name (Last, First, Middle Initial)

B. Eschelon Teleco (Advanced Telecom)

Mailing Address PO Box 34988

City
Seattle

State
WA

Zip Code
98124-1988

Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61207.E12338

Date of Disbursement

/ /

Amount of Each Disbursement this Period

679.20

PHONE BILL

Full Name (Last, First, Middle Initial)

C. FL&S

Mailing Address 7320 N Dreamy Draw Dr

City
Phoenix

State
AZ

Zip Code
85020-5212

Purpose of Disbursement
PARTY BUILDING TELEMARKETING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61207.E12322

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6726.40

PARTY BUILDING TELEMARKETING

SUBTOTAL of Disbursements This Page (optional)

14347.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Key Bank**

Mailing Address 1500 Edgewater St NW

City State Zip Code
Salem OR 97304-

Purpose of Disbursement
BANK SERV. CHRG CTS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61207.E12346

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

18.04

BANK SERV. CHRG CTS

Full Name (Last, First, Middle Initial)

B. Amy Langdon

Mailing Address 2830 Foxhaven Dr S

City State Zip Code
Salem OR 97306-

Purpose of Disbursement
REIM. EXP. FOR MILEAGE LODGING ET

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61207.E12335

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

3550.07

REIM. EXP. FOR MILEAGE LO-
DGING ET

Full Name (Last, First, Middle Initial)

C. LifeWise

Mailing Address 815 SW Bond St

City State Zip Code
Bend OR 97702-

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61207.E12339

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

354.85

HEALTH INSURANCE

SUBTOTAL of Disbursements This Page (optional)

3922.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Pitney Bowes Credit Corp

Mailing Address P. O. Box 85460

City Louisville State KY Zip Code 40285-5460

Purpose of Disbursement
POSTAGE MACHINE RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12349

Date of Disbursement

10 / 24 / 2006

Amount of Each Disbursement this Period

284.80

POSTAGE MACHINE RENTAL

Full Name (Last, First, Middle Initial)

B. Pitney Bowes Credit Corp

Mailing Address P. O. Box 85460

City Louisville State KY Zip Code 40285-5460

Purpose of Disbursement
POSTAGE MACHINE RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12350

Date of Disbursement

10 / 31 / 2006

Amount of Each Disbursement this Period

284.80

POSTAGE MACHINE RENTAL

Full Name (Last, First, Middle Initial)

C. Pitney Bowes Credit Corp

Mailing Address P. O. Box 85460

City Louisville State KY Zip Code 40285-5460

Purpose of Disbursement
POSTAGE MACHINE RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12351

Date of Disbursement

11 / 07 / 2006

Amount of Each Disbursement this Period

284.80

POSTAGE MACHINE RENTAL

SUBTOTAL of Disbursements This Page (optional)

854.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Pitney Bowes Credit Corp

Mailing Address P. O. Box 85460

City Louisville State KY Zip Code 40285-5460

Purpose of Disbursement
POSTAGE MACHINE RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12352

Date of Disbursement

11 / 14 / 2006

Amount of Each Disbursement this Period

284.80

POSTAGE MACHINE RENTAL

Full Name (Last, First, Middle Initial)

B. Pitney Bowes Purchase Power

Mailing Address PO Box 856042

City Louisville State KY Zip Code 40285-

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12340

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

271.00

POSTAGE

Full Name (Last, First, Middle Initial)

C. QWest**

Mailing Address PO Box 12480

City Seattle State WA Zip Code 98111-

Purpose of Disbursement
PHONES IN PORTLAND

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12341

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

161.32

PHONES IN PORTLAND

SUBTOTAL of Disbursements This Page (optional)

717.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Ricoh Ricoh

Mailing Address PO Box 310010273

City
Pasadena

State
CA

Zip Code
91110-0001

Purpose of Disbursement
COPIER SUPPLIES AND TONER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12343

Date of Disbursement

/ /

Amount of Each Disbursement this Period

311.71

COPIER SUPPLIES AND TONER

Full Name (Last, First, Middle Initial)

B. Ricoh Ricoh

Mailing Address PO Box 310010273

City
Pasadena

State
CA

Zip Code
91110-0001

Purpose of Disbursement
COPIER LEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12342

Date of Disbursement

/ /

Amount of Each Disbursement this Period

159.00

COPIER LEASE

SUBTOTAL of Disbursements This Page (optional)

470.71

TOTAL This Period (last page this line number only)

20312.47

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Key Bank**

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12347

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

1303.54

FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. Amy Langdon

Mailing Address 2830 Foxhaven Dr S

City Salem State OR Zip Code 97306-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12333

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

2291.95

FEA PAYROLL

Full Name (Last, First, Middle Initial)

C. Amy Langdon

Mailing Address 2830 Foxhaven Dr S

City Salem State OR Zip Code 97306-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12334

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

2291.94

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

5887.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 24

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Oregon Department of Revenue

Mailing Address PO Box 14800

City
Salem

State
OR

Zip Code
97309-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61207.E12348

Date of Disbursement

/ /

Amount of Each Disbursement this Period

291.00

FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. SAIF SAIF

Mailing Address 400 High Street

City
Salem

State
OR

Zip Code
97312-1000

Purpose of Disbursement
FEA WORKERS COMP

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61207.E12325

Date of Disbursement

/ /

Amount of Each Disbursement this Period

263.97

FEA WORKERS COMP

Full Name (Last, First, Middle Initial)

C. Belinda Smith

Mailing Address 687 SW Concord Way

City
Beaverton

State
OR

Zip Code
97006-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61207.E12329

Date of Disbursement

/ /

Amount of Each Disbursement this Period

584.56

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1139.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 24

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Belinda Smith

Mailing Address 687 SW Concord Way

City
Beaverton

State
OR

Zip Code
97006-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61207.E12330

Date of Disbursement

/ /

Amount of Each Disbursement this Period

551.08

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. David Taylor

Mailing Address 595 Rockwood St SE

City
Salem

State
OR

Zip Code
97306-1756

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61207.E12327

Date of Disbursement

/ /

Amount of Each Disbursement this Period

707.62

FEA PAYROLL

Full Name (Last, First, Middle Initial)

C. David Taylor

Mailing Address 595 Rockwood St SE

City
Salem

State
OR

Zip Code
97306-1756

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61207.E12328

Date of Disbursement

/ /

Amount of Each Disbursement this Period

501.23

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1759.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Cindy Wolfe

Mailing Address 595 Rockwood St SE

City Salem State OR Zip Code 97306-1756

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12331

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

947.51

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. Cindy Wolfe

Mailing Address 595 Rockwood St SE

City Salem State OR Zip Code 97306-1756

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61207.E12332

Date of Disbursement

11 / 15 / 2006

Amount of Each Disbursement this Period

947.51

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1895.02

TOTAL This Period (last page this line number only)

10681.91

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 19 / 24

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
FL&SNature of Debt (Purpose):
telemarketing

Mailing Address 7320 N Dreamy Draw Dr

City State ZIP Code
Phoenix AZ 85020-5212

Outstanding Balance Beginning This Period

21811.30

Transaction ID: 2LSE11265

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21811.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Direct Mail Systems, IncNature of Debt (Purpose):
Direct mail

Mailing Address 12450 Automobile Boulevard

City State ZIP Code
Clearwater FL 34622-

Outstanding Balance Beginning This Period

564.49

Transaction ID: 4LSE7774

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

564.49

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lightwave Electric LightwaveNature of Debt (Purpose):
Phone Bill

Mailing Address PO Box 20553

City State ZIP Code
Rochester NY 14602-

Outstanding Balance Beginning This Period

348.88

Transaction ID: 6LSE11694

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

348.88

1) SUBTOTALS This Period This Page (optional).....

22724.67

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 20 / 24

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
Oregon Republican Party**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pitney Bowes Purchase PowerNature of Debt (Purpose):
Postage

Mailing Address PO Box 856042

City State ZIP Code
Louisville KY 40285-

Outstanding Balance Beginning This Period

896.99

Transaction ID: 3LSE10304

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

896.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Eagle TeleconferencingNature of Debt (Purpose):
phone bill

Mailing Address 207 West Washington Street

City State ZIP Code
Rushville IL 62681-

Outstanding Balance Beginning This Period

473.30

Transaction ID: 1LSE11559

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

473.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&T WirelessNature of Debt (Purpose):
Cell phone bills

Mailing Address PO Box 79075

City State ZIP Code
Phoenix AZ 85062-

Outstanding Balance Beginning This Period

67180.90

Transaction ID: LSE11336

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

67180.90

1) SUBTOTALS This Period This Page (optional).....

68551.19

2) TOTALS This Period (last page this line number only).....

91275.86

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Oregon Republican Party

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- X Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 22 / 24
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

NAME OF ACCOUNT

Oregon Oregon Key
Bank Non federal
ac

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	6		2	0	0	6

TOTAL AMOUNT TRANSFERRED

7002.07

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7002.07

Transaction ID: H361120.C89200

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

SCHEDULE H3 (FEC Form 3X)
TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE 23 / 24
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

NAME OF ACCOUNT

Oregon Oregon Key
Bank Non federal
ac

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	5	/	2	0	0	6

TOTAL AMOUNT TRANSFERRED

7095.84

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative

7095.84

Transaction ID: H3120620060C89291

ii) Generic Voter Drive

Transaction ID:

iii) Exempt Activities

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

14097.91

TOTAL This Period (Generic Voter Drive)

0.00

TOTAL This Period (Exempt Activities)

0.00

TOTAL This Period (Direct Fundraising)

0.00

TOTAL This Period (Direct Candidate Support)

0.00

TOTAL This Period (Public Communications Referring Only to Party)

0.00

TOTAL This Period (Total Amount Transferred)

14097.91

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 24 / 24

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Certified Property

Mailing Address

PO Box 269

City

State

Zip Code

Salem

OR

97308-0269

Purpose of Disbursement:
Office Rent--November

Category/
Type

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

48101.08

Date

M M

/

D D

/

Y Y

Y Y

1 1

0 6

2 0

0 6

Transaction ID: H461207.E12345

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2204.13

3918.45

6122.58

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

2204.13

3918.45

6122.58

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

2204.13

3918.45

6122.58